

## Indiana Tobacco Prevention & Cessation Partner Information X-Change 2008 Registration Form Seeds of Hope September 16-17, 2008

## Instructions:

I. COMPLETE one form for each registrant. Type or print within boxes.

Entered By

Booth#\_

- 2. MAIL completed form(s) and fee(s) to: Meeting Services Unlimited, Inc, 135 S. Mitthoeffer Rd., Indianapolis, IN 46229 Or FAX: 317-578-0621
- 3. QUESTIONS? Call 317-841-7171

By registering for Information X-Change, you agree that your name, title, or unless you indicate otherwise in writing.	ganization and contact information can be used for a participation list
Complete one form for each registrant. Type or print clearly within boxes.	
First Name:	ast Name
Title:	
Company:	
Mailing Address(line I):  Mailing address(line 2):	
Invaring address (line 2):  City:	State: Zip:
Email:	
Phone:	Fax:
REGISTRATION FEES (Check the fee paid)	Pre-Conference (September 15 only)
2-Day Conference Registration  \$\Boxed{1}\$\$ \$130 on or before August 15, 2008	Media Advocacy Basics Spokesperson Training
□ \$150 on or after August 16, 2008	Research Symposium
	□ \$35
HOTEL ACCOMMODATIONS	Payment must accompany the registration form.  Please make check payable to: Meeting Services Unlimited, Inc.
Marriott East Hotel 7202 E 21St St	☐ Check here if you need vegetarian meals.
Indianapolis, IN 46219	
317-352-1231	I am: (check one)
\$97 per night flat rate for single, double, triple, quad occupancy Rooms are available until August 28th, 2008 on a first come,	☐ ITPC Funded Partner Agency ☐ Local Coalition Member/Community Volunteer
first serve basis – rooms are blocked under Indiana Tobacco	☐ ITPC Executive Board Member Academic Researcher
Prevention Cessation Partner Information X-Change. Tax not included.	☐ Faith Leader ☐ Voice Adult Ally
Please call the hotel directly for your reservation.	☐ State Tobacco Control Partner
	☐ College Student ☐ Other
Office Use Only	

Date Conf'd \_\_\_

Check#\_